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FEC FORM 1

STATEMENT OF ORGANIZATION

2007 IAN -5 A 10: 02

				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
John Edwards for	President,		i l	
		· · · · · · · · · · · · · · · · · · ·		
ADDRESS (number and street)	410 Market Street			
V	Suite,400		† 1 1 1 1	<u> </u>
(Check if address is changed)	Chapel Hill		NCI (2,751,6
COMMITTEE'S E-MAIL ADDRES	ss	CITY A	STATE ▲	ZIP CODE A
Ihaggard@johnedward	ls.com		_i_l_L_L_L_L	
COMMITTEE'S WEB PAGE ADD WWW.johnedwards.com COMMITTEE'S FAX NUMBER 9_1_9 - 9_6_7 - 3_6_ 2. DATE O1 7 TO2 3. FEC IDENTIFICATION NUMBER 4. IS THIS STATEMENT X	4 ₁ 4 ₁ 2007 JMBER ► C	AMENDED (A)		
Type or Print Name of Treasure Signature of Treasurer NOTE: Submission of false, erron	Julius L. Chan	nbers	Date /	02-2007

FE3AND42,PDF

ł -	FEC For	rm 1 (Revised 02	2/2003)										I	Page 2	1
5.	TYPE OF C	OMMITTEE (Ch	eck One)										·		
	(a) X	This committee	e is a princip	al campai	gn comn	nittee. (C	omplete	the car	ndidate	inforn	nation	below.))		
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)								date						
	Name of Candidate	John E	dwards	}	<u> </u>	<u>.l . .</u>	1 1		_	<u>1 1</u>	 _	<u> </u>	<u> </u>	<u> </u>	1
	Candidate Party Affiliation	on DEN	A E	Office Sought:		House		Sena	ite	X	Presi	dent	Sta Dis	ate strict	
	(c)	This committee	e supports/o _l	pposes on	ily one c	andidate,	and is	NOT an	ı autho	bezinc	commi	ttee.			
•	Name of Candidate			<u> </u>		<u> </u>	<u>. 1 . 1 . 1</u>	11	<u></u>		<u> </u>	<u> </u>	<u> </u>		<u> </u>
	(d)	This committee	e is a			tional, Sta subordinat		nittee of	f the		Bin in Angel	72	(Demod Republi		:.) Party.
	(e)	This committee	e is a separa	ate segreg	jated fun	ıd.									
	(f)	This committee committee.	e supports/o	pposes m	ore than	one Fed	eral can	didate,	and is	NOT	a sepa	arate se	gregate	ed fund (or party
6.	Name of An	y Connected O	rganization	or Affillat	ted Com	mittee									
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									<u> </u>			· · · · · · · · · · · · · · · · · · ·			
L;	<u></u>		<u></u>	_ 	<u>! Il</u>	<u> </u>	_ 					<u>. I</u>	<u> </u>		
	Mailing Addr	ess			<u> </u>	<u> </u>			<u> </u>		<u> </u>	<u> </u>			l. t l
			I			<u>LL_</u>		<u> </u>		11		1 1			
					<u> </u>								<u></u>	_]	<u> </u>
					CITY	A			;	STATE	A		ZIP	CODE	A
	Relationship		1 1		1 1 1	1 1 1		<u></u>		<u></u>			<u>! </u>		1 1 1
	Type of Con	nected Organiza	ıtion:												
	[72]	poration			Corporat	ition w/o (Capital S	3tock			Labo	r Orgar	nization		
	Mer	nbership Organiz	zation		Trade A	ssociation	1		20 4 00		Coop	erative			
															

•							•
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V	rite or Type Comr	nittee Name					
	John Edwards fo						
7.	Custodian of Rebooks and record		ify by name, addre	:ss (phone number	optional) and posit	ion of the pe	rson in possession of committee
	Full Name	Julius	L., Chambe	rs, , , , , ,		<u> </u>	
	Mailing Address		410 Market S	βtreet , , , ,	<u>i _i _ i _ i </u>		<u>. l . j . j . j . j . j . j . j . j . j </u>
			Suite 400	<u> </u>			
			Chapel Hill	1 1 1 1 1 1		NC	27516 -
	Title or Position	•		CITY A		STATE ▲	ZIP CODE A
	Treasurer	<u> </u>	<u> </u>	<u></u>	Telephone nur	mber 9	9 636 3 1,3,1
8.			l address (phone r ssistant treasurer).		the treasurer of the	e committee;	and the name and address of
	Full Name of Treasurer	Julius I	. Chambers	§ 1	<u>.t.,l</u>	<u> </u>	
	Mailing Address		410 Market	Street	<u> </u>		<u> </u>
			Suite 400				
			Chapel Hil	<u> </u>		NC	2,7,5,1,6,-
	Title or Position	▼		CITY A		STAT'E ▲	ZIP CODE A
	Treasure	r <u>l l l</u>			Telephone nu	mber [9]	19 636 3,131
	Full Name of Designated Agent	լLora H	laggard, ,	<u> </u>		<u> </u>	
	Mailing Address		410 Marke	t Street	: <u> </u>	<u> </u>	
			Suite 400		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	
			Chapel Hill			NC	27516-
	Title or Position	▼		CITY A		STATE A	ZIP CODE ▲
	Assistant	Treasur	er Lili		Telephone nu	ımber <u>9</u>	1,9 - 6,3,6 - 3,1,3,1

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9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.								
		[Wachoyia Bank, , , , , , , , , , , , , , , , , , ,							
	Mailing Address	150 Fayetteville Street Mall							
		 <u></u>							
		Raleigh NC 27602							
		CITY ▲ STATE ▲	ZIP CODE A						
	Name of Bank,	Depository, etc.							
	Mailing Address	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 						
		CITY ▲ STATE ▲	ZIP CODE A						

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